

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICESPRINTED: 07/14/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445169	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 07/07/2016
NAME OF PROVIDER OR SUPPLIER BETHANY HEALTH CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 421 OCALA DRIVE NASHVILLE, TN 37211		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 371 SS=F	<p>483.35(I) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY</p> <p>The facility must - (1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and (2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>This REQUIREMENT is not met as evidenced by: Based on facility policy review, observation, and interview, the facility failed to maintain the dish machine to ensure dishes were sanitized, failed to maintain food serving equipment in a clean and sanitary manner, and failed to store and maintain food in a sanitary environment, affecting 128 of 130 residents.</p> <p>The findings included:</p> <p>Review of the facility policy Dishwashing Machine Use dated 5/1/09, revealed, "...Dishwashing machine chemical sanitizer concentrations...chlorine 50-100ppm (parts per million)..."</p> <p>Review of the facility policy Manual Dishwashing/Storage dated 9/10/07 revealed "...check all dishes to be sure they are clean..."</p> <p>Review of the facility policy Food Storage dated 9/10/07 revealed "...Items removed from the original container, should be...labeled with the contents and date placed in storage..."</p>	F 371	<p>Autochlor, the dish machine contractor/supplier was contacted by the Dietary Manager on the morning of and an on-site visit was scheduled upon the arrival of the surveyor.</p> <p>The Dietary Manager and kitchen staff immediately removed all dishes from service and replaced them with disposable paper and plastic products with use to be continued until appropriate sanitation was confirmed.</p> <p>The Autochlor representative arrived at the facility on 7/5/16 at approximately 11:30am and conducted an inspection of the dish machine sanitizing system. A pin-hole leak in the sanitizer line was identified. The sanitizer line was immediately replaced by the Autochlor representative. (See attached invoice - Attachment #1)</p> <p>All dishes previously removed from service were washed, sanitized and placed back into service for the next scheduled meal, dinner on 7/5/16.</p> <p>All Dietary staff was in-serviced on the current policy in place, "Dishwashing Machine Use". In-services began on 7/6/16 to continue through 7/25/16. (Attachment #2)</p> <p>The Dietary Manager and Administrator will monitor the PPM</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

NHA

7/22/16

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that the safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 371	<p>Continued From page 1</p> <p>Observation in the dish room, with the Dietary Manager (DM) on 7/5/16 at 10:25 AM, revealed the dish machine was not receiving adequate sanitizer during the cycle to sanitize the dishes. Further observation revealed the sanitizer could not be detected on the sanitizer test strips, times 3 attempts. Continued observation of the kitchen revealed 3 of 6 six inch steam table pans with white debris, and 4 of 10 four inch steam table pans with dried food debris.</p> <p>Interview with the DM on 7/5/16 at 11:00 AM, in the dish room, revealed the sanitizer had been checked and "was not up to our standards." Further interview confirmed she felt the sanitizer strips were old and the dish machine company had been called to bring new strips.</p> <p>Interview with the DM on 7/5/16 at 11:05 AM in the kitchen confirmed the facility failed to maintain food serving equipment in a clean and sanitary manner.</p> <p>Interview with Administrator #2 on 7/5/16 at 11:15 AM, in the dish room, confirmed the dish machine was not functioning properly and was not sanitizing the dishes. Continued interview confirmed the test strips were not detecting sanitizer.</p> <p>Observation in the first floor nourishment room, with Administrator #1 on 7/6/16 at 8:55 AM, revealed 6 of 7 house supplements thawed, with no label containing storage placement date or use by date.</p> <p>Interview with Administrator #1 on 7/6/16 at 8:55 AM, in the first floor nourishment room confirmed</p>	F 371	<p>QC log semi-weekly for 4 weeks beginning 7/18/16 to ensure compliance. The Dietary Manager will report to the QAPI Committee monthly beginning with the monthly meeting scheduled for July 25, 2016. The Dietary Manager will continue reporting for two additional months. After three months of reporting, the QAPI Committee will determine the reporting frequency thereafter.</p> <p>The 3 six inch steam table pans and the 4 four inch steam table pans were immediately removed from service. All other pots and pans were immediately inspected for food or white debris and no other pans were found. The dietary staff responsible for washing steam table pans has been in-serviced on thoroughly inspecting for cleanliness and/or removing from service if the debris cannot be adequately removed.</p> <p>The in-services began on 7/6/16 thru 7/25/16. (Attachment #3)</p> <p>The Dietary Manager and Administrator will monitor steam table pans bi-weekly for 4 weeks beginning 7/18/16 to ensure compliance. The Dietary Manager will report to the QAPI Committee monthly beginning with the monthly meeting scheduled for July 25, 2016.</p>		

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F 371	Continued From page 2 6 of 7 house supplements thawed, with no label containing storage placement date or use by date, and available for resident consumption.	F 371	<p>The Dietary Manager will continue reporting for two additional months. After three months of reporting, the QAPI Committee will determine the reporting frequency thereafter.</p> <p>The 6 of 7 house supplements were immediately discarded. The Administrator inspected all locations for dated house supplements and no other un-dated or expired house supplements were found. After review, it was determined the labels (to include the date) with resident names on them were being removed if not used for that specific patient. The labeling procedure was revised to now include two labels; 1) patient name/room number and 2) expiration date. The new procedure also instructs the dietary staff to put both labels on the supplement container separately as to avoid both labels being pulled off inadvertently. (Attachment #4)</p> <p>All Dietary staff was in-serviced on the new procedure, the in-services began on 7/6/16 thru 7/25/16. (Attachment #5)</p> <p>The Dietary Manager and Administrator will monitor supplement dates bi-weekly for 4 weeks beginning 7/18/16 to ensure compliance. The Dietary Manager will</p>		

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			<p>(continued from page 3)</p> <p>report to the QAPI Committee monthly beginning with the monthly meeting scheduled for July 25, 2016. The Dietary Manager will continue reporting for two additional months. After three months of reporting, the QAPI Committee will determine the reporting frequency thereafter.</p> <p>The QAPI Committee meets monthly. Membership of the QAPI Committee includes the Medical Director, Administrator, Dietary Manager, DON, Environmental Services Director, Nursing Unit Managers, MDS Staff, Activities Director, Clinical Coordinator, Social Services Director and Admissions Coordinator.</p>		7/25/16